

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS     | ID NO.     | DATE            |
|---------------------------|--------------|------------|-----------------|
| FEE DETERMINATION         | <i>WJ</i>    |            | <i>8/19/00</i>  |
| O.I.P.E. CLASSIFIER       |              |            |                 |
| FORMALITY REVIEW          | <i>M. H.</i> | <i>625</i> | <i>10-04-00</i> |
| RESPONSE FORMALITY REVIEW |              |            |                 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
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30662 U.S. PTO  
09/637082  
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*Jeff*  
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TITLE

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